## PATENT APPLICATION EE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number 8 09/554288

CLAIMS AS FILED - PART I SMALL ENTITY						
TOTAL CLAIMS (Column 1) (Column 2)		olumn 2)	SMALL ENTITY TYPE		OTHER THAN R SMALL ENTITY	
	A.S.	***	RATE FEE	RATE	FEE	
FOR / O/ NILIN (	NUMBER FILED NUM	MBER EXTRA	BASIC FEE	OR BASIC FE	840	
TOTAL CHARGEABLE SLAIMS	minus 20= * .		YS 9-	OR X\$18=		
INDEPENDENT CLAIMS minus 3 =			X40=	OR X80=		
MULTIPLE DEPENDENT CLAIM PRESENT			+135=	OR +270=		
* If the difference in column 1 is less than zero, enter "0" in column 2		column 2	TOTAL	OR TOTAL	XX	
CLAIMS AS AMENDED - PART II					DIO I	
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY						
REMAINING AFTER AMENDMENT  Total  Independent	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE TIONAL FEE	RATE	ADDI- TIONAL FEE	
Total 4 4 A	Minus 4 20		X\$ 9=	OR X\$18=	×.	
FIRST PRESENTATION OF MU	Minus *** 3	= (********	X40=	OR X80=	X.4	
	SETTI CE DEPENDENT CLAIM	A L	+135=	OR +270=		
			TOTAL	OP TOTAL		
(Column 1)	(Column 2)	(Column 3)	ADDIT, FEE	ADDIT. FEE	i i	
CLAIMS REMAINING AFTER AMENDMENT Total Independent	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDI- RATE TIONAL FEE	RATE	ADDI- TIONAL FEE	
Total + + + + + + + + + + + + + + + + + + +	Minus "20		X\$ 9=	OR X\$18=		
FIRST PRESENTATION OF MU	Minus W 4 3		X40-	OR X80=		
	EIT GE DEFENDENT CLAIM		405	X ( )		
		<b>*</b> * <b>\$</b> 69	TOTAL	OR +270=		
ADDIT FEE ADDIT FEE						
CLAIMS REMAINING	(Column 2) HIGHEST	(Column 3)				
AFTER AMENDMENT	NUMBER PREVIOUSLY	PRESENT EXTRA	ADDI- RATE TIONAL	RATE	ADDI- TIONAL	
	PAID FOR		FEE -	-	FEE	
Independent	Ainus •••		X\$ 9=	)R X\$18=		
FIRST PRESENTATION OF MUL	TIPLE DEPENDENT CLAIM		X40=	OR X80=		
If the entry in column 1 is 1 and 1			+135= C	R +270=		
If the entry in column 1 is less than the If the "Highest Number Previously Paid "If the "Highest Number Previously Paid The "Highest Number Previously Paid	For IN THIS SPACE is less than	20, enter "20." A	TOTAL C	R TOTAL		
The "Highest Number Previously Paid I						
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